

COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION
(Page 1)

CF0 13610 US

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled
SYSTEM HAVING DEVICES CONNECTED VIA COMMUNICATION LINES

the specification of which ☐ is attached hereto ☒ was filed on June 25, 1999 as United States Application
No. or PCT International Application No. 09/344,509
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b), of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designates at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate, or PCT international application having a filing date before that of the application on which priority is claimed:

Country	Application No.	Filed (Day/Mo./Yr.)	(Yes/No) Priority Claimed
JAPAN	10-195118	26 June 1998	YES
JAPAN	10-208536	9 July 1998	YES
JAPAN	10-225198	27 July 1998	YES
JAPAN	11-176759	23 June 1999	YES

I hereby appoint the practitioners associated with the firm and Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to the address associated with that Customer Number:

FITZPATRICK, CELLA, HARPER & SCINTO
Customer Number: 05514

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Sole or First Inventor KENICHIRO ONO
Inventor's signature *Kenichiro Ono*
Date August 20, 1999 Citizen/Subject of JAPAN
Residence 26-5-207, Tomuro 5-chome, Atsugi-shi, Kanagawa-ken,
Japan
Post Office Address c/o Canon Kabushiki Kaisha
30-2, Shimomaruko 3-chome, Ohta-ku, Tokyo, Japan

Full Name of Second Joint Inventor, if any YOSHIKAZU SHIBAMIYA
Second Inventor's signature *Yoshikazu Shibamiya*
Date August 18, 1999 Citizen/Subject of JAPAN
Residence 25-5-416, Okamura 3-chome, Isogo-ku, Yokohama-shi,
Kanagawa-ken, Japan
Post Office Address c/o Canon Kabushiki Kaisha
30-2, Shimomaruko 3-chome, Ohta-ku, Tokyo, Japan

COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION
(Page 2)

Full Name of Third Joint Inventor, if any TATSUYA NAKAJIMA
Third Inventor's signature Tatsuya Nakajima
Date August, 20, 1999 Citizen/Subject of JAPAN
Residence 15-15, Eda Minami 3-chome, Tsuzuki-ku, Yokohama-shi,
Kanagawa-ken, Japan
Post Office Address c/o Canon Kabushiki Kaisha
30-2, Shimomaruko 3-chome, Ohta-ku, Tokyo, Japan

Full Name of Fourth Joint Inventor, if any _____
Fourth Inventor's signature _____
Date _____ Citizen/Subject of _____
Residence _____
Post Office Address _____

Full Name of Fifth Joint Inventor, if any _____
Fifth Inventor's signature _____
Date _____ Citizen/Subject of _____
Residence _____
Post Office Address _____

Full Name of Sixth Joint Inventor, if any _____
Sixth Inventor's signature _____
Date _____ Citizen/Subject of _____
Residence _____
Post Office Address _____

Full Name of Seventh Joint Inventor, if any _____
Seventh Inventor's signature _____
Date _____ Citizen/Subject of _____
Residence _____
Post Office Address _____

Full Name of Eighth Joint Inventor, if any _____
Eighth Inventor's signature _____
Date _____ Citizen/Subject of _____
Residence _____
Post Office Address _____